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RUEHTO/AMEMBASSY MAPUTO PRIORITY 5684
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UNCLAS SECTION 01 OF 05 PRETORIA 003029

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SENSITIVE BUT UNCLASSIFIED SIPDIS

HHS FOR OGHA, CDC ATLANTA FOR JULIE GERBERDING AND STEVE BLOUNT, USAID FOR GH/KENT HILL AND KEN YAMASHITA, NSC FOR BOBBY PITTMAN AND MIKE MAGAN, AF FOR A/S FRAZER

E.O. 12958: N/A

TAGS: ECON SOCI PGOV PREL SF

SUBJECT: SECRETARY LEAVITT CONCLUDES SUCCESSFUL VISIT TO SOUTH AFRICA

SUMMARY

11. (U) U.S. Secretary of Health and Human Services (HHS) Michael O. Leavitt completed a successful visit to South Africa August 18-21, 2007. The Secretary and his delegation visited four sites in Gauteng and KwaZulu-Natal Provinces funded by the President's Emergency Plan for Aids Relief to demonstrate the wide range of activities of our 400-plus South African and international partners. Secretary Leavitt and most senior members of the delegation also met with Minister of Social Development Dr. Zola Skweyiya and Deputy Minister for Foreign Affairs Aziz Pahad. Secretary Leavitt stressed the collaborative nature of our work with the South African Government and our many non-governmental partners (NGOs). Minister Skweyiya said it was good that Secretary Leavitt had come, hoped that the U.S. and South African governments could cooperate more on social issues, and expressed gratitude for the U.S. Government's assistance. Secretary Leavitt also held a series of well-attended press

SIPDIS

conferences, media roundtables and electronic interviews in Johannesburg, Pretoria and Durban. The international and local media responded with great interest, and reported favorably on his activities and messages. Secretary Leavitt's visit highlighted the U.S. Government's continuing commitment to our partnership with the South African Government and NGOs in the fight against HIV/AIDS. The visit supported Post's bilateral and public-diplomacy efforts, and created opportunities to expand America's help to those who need it the most -- those infected by the HIV/AIDS epidemic, including the growing number of orphans left in its wake. End Summary.

Purpose of the Visit

12. (U) HHS Secretary Michael Leavitt completed a successful visit to South Africa from August 18-21, 2007. A series of visits to programs implemented under the President's Emergency Plan for AIDS Relief was the centerpiece of the South African leg of the visit. Secretary Leavitt's delegation included U.S. Global Aids Coordinator Ambassador

Mark Dybul; the Director of the HHS Office of Global Health Affairs (OGHA), Dr. William Steiger; the Director of the Centers for Disease Control and Prevention (CDC), Dr. Julie Gerberding; the Assistant Administrator for Global Health at the U.S. Agency for International Development (USAID), Dr. Kent Hill; HHS/OGHA Director for African Affairs, Dr. Samuel Adeniyi-Jones; the Director of the Fogarty International Center of the HHS National Institutes of Health (NIH), Dr. Roger I. Glass; and State Department DAS for African Affairs Carol Thompson. The Charge, HHS/CDC Country Director, USAID Director, Acting Health Attach, Consul General in Durban (while in Durban) and Economic Counselor (Control Officer) accompanied the delegation.

Site Visits

13. (U) Secretary Leavitt and his delegation visited four sites funded by the Emergency Plan in Gauteng and KwaZulu-Natal provinces, selected to demonstrate the wide range of activities of our 400-plus South African (80 percent) and international (20 percent) partners that implement the South Africa program. The four sites were the Mercy Clinic in Winterveldt Township, and Heartbeat in Nellmapius Township, both outside of Pretoria; CAPRISA in Vulindlela, outside of Pietermaritzburg; and the University of KwaZulu-Natal (KZN) Medical School in Durban.

Mercy Clinic

On August 20, Secretary Leavitt and his delegation visited the Mercy Clinic, a large multi-purpose facility located in Winterveldt township in Gauteng Province. Run by the Order of Mercy, the facility receives partial funding from the

PRETORIA 00003029 002 OF 005

Emergency Plan, and provides a range of health care and community services, including basic health care, dentistry, vocational education, psychosocial support for orphans and vulnerable children (OVCs) and their caregivers, nutrition programs, gardens, skills-training and employment-generation activities. Emergency Plan funding provides confidential, voluntary counseling and testing (VCT) and support for the provision of anti-retrovirals (ARVs), although the South African Government provides the drugs themselves. Secretary Leavitt toured the facility, and conversed with patients about the impact of the Emergency Plan program on their lives and work, and with home-based caregivers about their experience with HIV/AIDS in the Winterveldt community. He also spoke to several children and their guardians who are in the facility's OVC program.

Heartbeat

Later on August 21, Secretary Leavitt visited the Heartbeat facility in the township of Nellmapius, north of Pretoria. The site furnishes a range of support for OVCs and their caregivers (grandmothers, elder siblings, or other family members and friends). Located in a set of brightly colored trailers and containers next to a new primary school, the facility feeds, tutors, counsels, arranges play activities and holiday programs, provides uniforms and books and improves the lives of children devastated by the loss of both parents. In most cases, grandmothers are raising the children; however, in a significant percentage of cases the orphans are living in child-headed households. The program also assists OVCs and their caregivers to access government grants and services, and provides training in child care and income-generation to household heads. Secretary Leavitt interacted with groups of primary school children who were receiving homework supervision and one-on-one tutoring and psychosocial support, including the making of memory boxes. Secondary students shared with Secretary Leavitt their plans for further study and occupational goals, and a group of grandmothers who talked about their experiences in raising

their grandchildren and generating additional income.

CAPRISA Vulindlela Research Facility

On August 21, Secretary Leavitt and his delegation traveled to KwaZulu-Natal, South Africa's most populous province (nearly 10 million people), and the region most affected by the HIV/AIDS epidemic. Secretary Leavitt visited a research facility in Vulindlela run by the Centre for AIDS Programme of Research in South Africa (CAPRISA). CAPRISA's Vulindlela facility is located in a rural area (about an hour and a half outside Durban and 40 minutes from Pietermartizburg) primarily funded by the Emergency Plan (through USAID and HHS/CDC) and HHS/NIH. The facility is notable for the local community's support of its activities. Secretary Leavitt discussed the integration of the facility into the community with traditional leaders, a Peace Corps Volunteer, a local NGO, a Reverend, and a local Department of Health representative. Secretary Leavitt then interacted with medical personnel who are running HIV/AIDS prevention research programs, and had an opportunity to speak with several participants in a microbicide trial. Secretary Leavitt also engaged with patients who are receiving anti-retroviral therapy at the facility. To close the visit, Secretary Leavitt discussed the challenges faced by the local

SIPDIS

community with researchers, traditional leaders, and community support groups during a lunch hosted by CAPRISA. All parties agreed that the community's biggest challenge was to curb the number of new HIV/AIDS infections, but that this had proven difficult.

University of KZN Nelson R. Mandela School of Medicine

In Durban, also on August 21, Secretary Leavitt visited the University of KwaZulu-Natal's Doris Duke Medical Research Institute, where he delivered a speech to over 100 medical students and researchers, including 15 beneficiaries of U.S. grants. The Medical School receives nearly 50 percent of its research funding from U.S. private and public sources (USAID and HHS, including CDC and NIH, some of which is Emergency

PRETORIA 00003029 003 OF 005

Plan financing). In his speech, Secretary Leavitt reflected upon his experiences while visiting the Heartbeat and Winterveldt sites on August 20. He emphasized that he believed there was hope in the fight against HIV/AIDS. He also discussed President Bush's personal commitment to the fight against HIV/AIDS and his request for a doubling of Emergency Plan funding. Secretary Leavitt added that he would encourage Congress to approve the proposed increase, as he had witnessed in South Africa the positive impact of programs funded by the U.S. Government. Secretary Leavitt and the audience then engaged in a question-and-answer session. Most questions revolved around medical education and training, and South Africa's need to develop the next generation of scientists and doctors. The University also used the occasion of Secretary Leavitt's visit to announce a USD 30 million grant by the Howard Hughes Medical Institute to build a research institute to focus on tuberculosis (TB) and extensively drug-resistant TB.

Ministerial Meeting

14. (SBU) Secretary Leavitt and some of the senior members of the delegation also met with the South African Minister of Social Development, Dr. Zola Skweyiya. Deputy Minister for Foreign Affairs Aziz Pahad, Director-General for Social Development Vusimuzi Madonsela and Director-General for Health Thami Mseleku accompanied Skweyiya. The Embassy had requested a meeting with the Deputy President, Phumsile Mlambo-Ngcuka, who was in Cape Town to meet with Parliament, and Minister of Health Dr. Manto Tshabalala-Msimang, who was

visiting the Democratic Republic of Congo with President Thabo Mbeki. The Minister of Health later sent a letter to express her regret that they had not been able to meet and her wish that they be able to meet soon, hopefully in South Africa.

15. (SBU) Secretary Leavitt stressed the collaborative nature of our work with the South African Government and our many NGO partners, while underlining the success of the Emergency Plan's partnership with the Ministry of Social Development in the support of OVCs. Minister Skweyiya said it was good Secretary Leavitt had come and he hoped the U.S. and South

SIPDIS

African governments could cooperate more on social issues. He specifically expressed a need for help in increasing the number of university-trained social workers and expanding the cadre of rural social/health workers (such as medical clinicians/medical extenders) to help extend service to rural areas where there is a lack of permanent infrastructure, and he appealed for short-term/bridge funding for additional personnel. The Director-General of Health added there would soon be an announcement of new roles for nurses because of the shortage of doctors. The Director-General of Social Development said his Ministry was developing a campaign to address child poverty, and asked for help in creating a data base of child-headed households so the Ministry can best target them.

16. (SBU) The Minister said his Ministry was working closely with civil society and, particularly, the religious sector because it had a broader network than anyone else, and because "the government can't do it alone." Dr. Hill thanked the Minister for the cooperation of the Ministry, and said their relationship was one of the best cooperative relationships USAID has. Dr. Hill also offered to participate in the Ministry's quarterly planning meetings to look for better ways to cooperate. The Minister ended the meeting by voicing the South African Government's gratitude for the assistance from the United States, "especially USAID and for empowering NGOs."

Secretary Leavitt's Message

SIPDIS

17. (U) Secretary Leavitt communicated the following key messages at the sites and Ministerial meeting:

PRETORIA 00003029 004 OF 005

- -- He had come to South Africa with an intellectual engagement to the Emergency Plan program but was leaving with an emotional commitment, generated by his personal interaction with those who were implementing the program, and, above all, the men, women and children who were the recipients of its services;
- -- The Emergency Plan was President Bush's program and would not have been possible without his personal and direct involvement. The President is 100-percent committed to the program and the attainment of its goals because it is the right thing to do;
- -- The Emergency Plan has the full and unwavering support of the American people, who want to help and feel good about what they are doing;
- -- The Emergency Plan and its success is a function of the partnership between South Africa and the United States. United States funding is ultimately a catalyst, a way of helping South Africa address the epidemic, as spelled out in its well-constructed National Strategic Plan (2007-2011), which now needs to be implemented;

-- Prevention is the key component of beating HIV/AIDS. The Emergency Plan has been successful in meeting its treatment targets, but must now focus on reducing transmission and lowering incidence rates;

Media Events and Coverage

¶8. (U) Secretary Leavitt held a series of well-attended press conferences, media roundtables and electronic interviews. International and local media responded with great interest, and reported favorably on his activities and message. There were two dozen media placements, including news articles, opinion pieces and radio and TV coverage. All the placements were positive; none were critical of the United States. SABC Radio's Channel Africa, which broadcasts its programs throughout the African continent, interviewed Secretary Leavitt. Secretary Leavitt later spoke for five

SIPDIS

minutes on 702, the highest-rated morning radio talk show in South Africa. Secretary Leavitt successfully communicated in all of his media events that the United States has invested and will continue to invest hundreds of millions of dollars in HIV/AIDS prevention, care and treatment in South Africa, and that the South African Government's National Strategic Plan (2007-2011) is a good plan that needs to be implemented. Sample headlines from the South African press include: "U.S. Cash Fights AIDS in SA" (The Citizen); "US Health Secretary Leavitt Impressed by SA's AIDS Approach" (Business Day); "US Hopes to Spend More on AIDS in SA" (Mail & Guardian); and "Howick Centre Gets Powerful Visitor" (Daily News of Durban). Secretary Leavitt declined to comment on President Mbeki's recent dismissal of Deputy Minister of Health Nozizwe Madlala-Routledge, which has dominated local headlines and has received coverage in the international press during the past two weeks. When asked about the issue, he consistently and pointedly referred to the need to focus on the full implementation of South Africa's National Strategic Plan. Media and public opinion have not criticized his response.

Outcomes and Follow-Up

19. (SBU) There were a number of significant outcomes from this visit. The U.S. public profile was raised in a positive way on a subject that is of great interest to the vast majority of South Africans. The meeting with the Minister of Social Development and the Vice Minister of Foreign Affairs demonstrated the South African Government's public support and gratitude for the Emergency Plan. The meeting also opened new avenues for future cooperation, such as increasing the number of university-trained social workers, training rural social/health workers, creating a data-base for

PRETORIA 00003029 005 OF 005

child-headed households, and participating in the Ministry of Social Development's quarterly planning meetings. The Embassy will work with the South African Government to follow-up on these areas.

Comment

110. (SBU) Secretary Leavitt's visit highlighted the U.S. Government's continuing commitment to our partnership with the South African Government and NGOs in the fight against HIV/AIDS. The visit supported the post's bilateral and public-diplomacy efforts, and created opportunities to expand America's help to those who need it most -- those affected by the HIV/AIDS epidemic, including the growing number of

orphans left in its wake. End Comment.

 $\underline{{\P}}11.$ (U) Secretary Leavitt has approved this cable. Teitelbaum